

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE INTEREST OF

**Petition for Waiver
of Jurisdiction**

Name

Date of Birth

Case No. _____

1. I request that the court waive the juvenile into adult court.
2. I am the
☐ district attorney. ☐ juvenile.
☐ judge, and by filing this petition, disqualify myself from further proceedings in this matter.
3. This petition is filed
☐ prior to the plea hearing.
☐ prior to the adjudication because the juvenile denies the facts of the petition and will be 17 years of age prior to the adjudication.
4. This request is based on the following information:

☐ a. On or after the juvenile's 14th birthday, the juvenile violated:

<input type="checkbox"/> 940.03	Felony murder	<input type="checkbox"/> 940.305	Taking hostages
<input type="checkbox"/> 940.06	2nd degree reckless homicide	<input type="checkbox"/> 940.31	Kidnapping
<input type="checkbox"/> 940.225(1)	1st degree sexual assault	<input type="checkbox"/> 943.10(2)	Armed burglary
<input type="checkbox"/> 940.225(2)	2nd degree sexual assault	<input type="checkbox"/> 943.32(2)	Armed robbery
<input type="checkbox"/> 961.41(1)	Manufacture or delivery of a controlled substance		

☐ b. On or after this juvenile's 14th birthday, this juvenile committed the following felony under chs. 939 to 948 or 961 at the request of or for the benefit of a criminal gang, as defined in §939.22(9), Wis. Stats.

<u>Crime</u>	<u>Statute Number</u>

☐ c. On or after the juvenile's 15th birthday, the juvenile violated the following state criminal law(s):

<u>Crime</u>	<u>Statute Number</u>
5. The facts supporting this request for waiver are: ☐ **See attached.**

Signature of Petitioner

Name Printed or Typed

Date